

**CERTIFICATION OF ELIGIBILITY**  
**SCHOOL FACILITIES NEEDS ASSESSMENT GRANT PROGRAM**

LOCAL EDUCATIONAL AGENCY (LEA)

FIVE-DIGIT DISTRICT CODE

COUNTY

NAME OF LEA REPRESENTATIVE

TITLE

E-MAIL ADDRESS

TELEPHONE NUMBER

**GENERAL INFORMATION**

Of the schools identified by the California Department Education as schools ranked in deciles 1 to 3 inclusive on the 2003 base Academic Performance Index, any school that was newly constructed on or after January 1, 2000, is ineligible for the School Facilities Needs Assessment Grant Program (SFNAGP) and the Emergency Repair Program (ERP).

For purposes of this certification, the year of construction shall be considered the date the Notice of Completion was filed with the county recorder, if available. If the date of the Notice of Completion is not available, the LEA may use the year of occupancy as evidenced by historical record.

**INSTRUCTIONS**

This form is a one-time submittal to certify each identified school site's eligibility for the SFNAGP and the ERP. Use the attached page to list the *ineligible* schools based on the above criteria. Include the school name, the County-District-School (CDS) site code, the SFNAGP allocation, and the year of construction of the initial school building(s) on the site for each school deemed ineligible. Print additional sheets if necessary.

The sites identified on the attached List of Ineligible Schools will be deemed *ineligible* for participation in the SFNAGP and the ERP based on the dates of construction reported by the LEA using this Certification of Eligibility Form.

Complete and mail the Certification of Eligibility to the OPSC at the following address:

Office of Public School Construction  
1130 K Street, Suite 400  
Sacramento, CA 95814

Upon receipt of the Certification of Eligibility, the OPSC will release SFNAGP funds for all eligible schools under the jurisdiction of the LEA.

**CERTIFICATION**

I, \_\_\_\_\_, an individual designated as an authorized LEA representative by the governing board of the LEA, certify that the information reported to the OPSC on the Certification of Eligibility submitted on \_\_\_\_\_ is accurate. Additionally, (check one of the following)

☐ I understand that all the sites that received a Needs Assessment Apportionment were newly constructed prior to January 1, 2000 and a School Facilities Needs Assessment Report must be completed for each school.

☐ I understand that the LEA has \_\_\_\_\_ ineligible sites and is not required to perform a School Facilities Needs Assessment for these sites. Furthermore, I acknowledge that the LEA's Needs Assessment Apportionment shall be reduced by \$ \_\_\_\_\_, the total grant funds allocated for ineligible sites.

LEA REPRESENTATIVE NAME (PRINT)

TELEPHONE NUMBER

LEA REPRESENTATIVE SIGNATURE

DATE

[illegible]